

Attorney Docket No.:

DECLARATION FOR PATENT APPLICATION☒ Original☐ Supplemental☐ Substitute☐ PCT

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below), or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CELL PREPARATION AND USE OF THE PREPARATION FOR TREATING JOINTS AND CARTILAGE DEFECTS, AND METHODS FOR THE PRODUCTION THEREOF

(Title of the Invention)

the specification of which (check one)

☐ is attached hereto.☐ was filed on _____ as Application Serial No. _____☒ was described and claimed in PCT International Application No. PCT/EP2004/002820 filed on March 18, 2004 and as amended under PCT Article 19 on - (if any).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 (a) - (d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified, by checking the box below, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Applications			Priority Claimed		Copy Attached	
Application Number	Country	Foreign Filing Date (MM/DD/YYYY)	YES	NO	YES	NO
103 11 889.6	DE	03/18/2003	X			

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I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below and claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(e) of any PCT International application(s) designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Parent Application Number	Filing Date (mm/dd/yyyy)	Status (Mark Appropriate Columns Below)		
		Patented	Pending	Abandoned

As a named inventor, I hereby revoke all prior powers and appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

FIRM NAME: NOVAK DRUCE & QUIGG, LLP, 1300 Eye Street, N.W., 400 East Tower, Washington, D.C. 20005.

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I acknowledge the above-listed attorneys and agents and their firm NOVAK DRUCE & QUIGG, LLP represent my employer (if I am an employee and this application has been or will be assigned to my employer) or the entity with which I have contracted (if I am an independent contractor and this application has been or will be assigned to such entity) and in such cases do not represent me individually. I further acknowledge I have not established, nor will I seek to establish, any personal attorney/client relationship with NOVAK DRUCE & QUIGG, LLP in connection with this application and understand that, should I require legal representation, I will obtain such, at my expense, other than through NOVAK DRUCE & QUIGG, LLP.

Send Correspondence to: The address associated with CUSTOMER NUMBER 26474

Direct telephone calls to: Tracy W. Druce at (202) 659-0100

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first or sole inventor DAVID WOHLRAB

Inventor's signature David Wohlrab

Date 06/09/05

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Full name of second inventor _____

Inventor's signature _____

Date _____

Residence _____

Citizenship _____

Post Office Address _____

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